ARIZONA DEPARTMENT OF WATER RESOURCES

WATER MANAGEMENT DIVISION

3550 North Central Avenue, Phoenix, Arizona 85012 Phone (602) 771-8585 Fax (602) 771-8688

WELL CONSTRUCTION SUPPLEMENT (form DWR 55-90)

Well Registration Number 55-1. Well Location: ______ 1/4 of the _____ 1/4 of the _____ 1/4 , Sec._____, Township ______ Range ______. 2. Position Location of the Well: Latitude ° ' " Longitude ° ' Datum:

NAD 83

NAD 27 □ Other: _____ 3. County . 4. Date construction to start: Time period well will remain in use:______ 5. 6. Is pump equipment to be installed? If so, design pump capacity: GPM. 7. Well construction plan: a. Drilling method (mud rotary, hollow-stem auger, etc.)______. b. Borehole diameters _____ inches from _____ feet to _____ feet. _____ inches from _____ feet to _____ feet. c. Casing materials d. Method of well development (bail, air lift, surge, etc.) e. Will surface or conductor casing extend above grade?_____

8. Include a detailed construction diagram of the proposed well design. The diagram should verify consistency with minimum construction requirements specified in the Department's well construction rules found in Arizona Administrative Code (A.A.C.) R12-15-801 et seq. Specifically, the diagram should include borehole diameters; casing materials and diameters; perforation intervals; the expected water level; depth and thickness of the surface seal; proposed grouting materials; and the length that the surface or conductor casing will extend above grade, or vault details, if specified.

Pursuant to Arizona Revised Statutes (A.R.S.) § 45-594.B, all well construction, replacement, deepening and abandonment operations shall comply with the rules adopted pursuant to this section. Therefore, any existing well that is deepened or modified must be brought into compliance with minimum well construction standards specified above, if not already in compliance.

9. Proposed materials and method of abandonment if well is to be abandoned after project is completed (Minimum requirements per A.A.C. R12-15-816):

| 10. | | orage area of hazardous material, or petroleur | | |
|------------------------|---|---|---------------------------------|--|
| 11. | Is this well to monitor existing | g contamination?YesNo | | |
| | Potential contamination? | YesNo If yes, please provide explai | nation: | |
| 12. | Name of Consulting firm, if any: | | | |
| | Address | City State | Zip | |
| | Contact Person: | Telephone Number: | | |
| 13. | Drilling firm | | | |
| | DWR License Number: | ROC License Category: | | |
| 14. | . Special construction standards, if any, required pursuant to A.A.C. R12-15-821: | | | |
| l (we | e),(print name) | hereby affirm that all information provide application is true and correct to the knowledge and belief. | ded in this e best of my/our | |
| Signature of Applicant | | Date | Date | |